

Nevada Commission on Ethics
FINANCIAL DISCLOSURE STATEMENT
 (attach additional sheets if necessary)

name Elsie Lorraine Lewis telephone 702 8384768
 address 2020 Spring Rose St city, state, zip Las Vegas, NV 89134
 length of residence in Nevada 32 yrs district where registered to vote [NRS 281.571, Subsection 1(a)]

list all public offices for which this financial disclosure statement is required [NRS 281.571, Subsection 1(g)]:

public office	annual compensation	term or date appointed	annual (3/31) NRS 281.561(1)(c)	candidate NRS 281.561(1)(a)	NEW appointment NRS 281.561(1)(b)	leaving office NRS 281.561(1)(d)
City of Las Vegas Civil Service	900 ⁰⁰	1998	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

list all general sources of income for you and members of your household over 18 [NRS 281.571, Subsection 1(b)]:

	self	household member
Perkins Elmer Pension	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Bechtel Nevada Pension	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Social Security	<input checked="" type="checkbox"/>	<input type="checkbox"/>

list each creditor to whom you or a member of your household owes \$5,000 or more [except (1) debt secured by mortgage or deed of trust on real property which is not required to be listed below, and (2) debt for which a security interest in a motor vehicle for personal use was retained by seller] [NRS 281.571, Subsection 1(d)]:

American Express	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

list each business entity (i.e., organization or enterprise operated for economic gain, including a proprietorship, partnership, firm, business, trust, joint venture, syndicate, corporation or association) with which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner in whole or in part, limited or general partner, or holder of a class of stock or security representing 1% or more of the total outstanding stock or securities issued by the business entity [NRS 281.571, Subsection 1(f)]:

MTA Enterprises	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input type="checkbox"/>

list specific location and particular use of all real estate (other than personal residence): (1) in which you or a member of your household has a legal or beneficial interest; (2) the fair market value of which is \$2,500 or more; and (3) located in this state or an adjacent state [NRS 281.571, Subsection 1(c)]:

specific location	particular use

list the identity of donor and value of each gift of all gifts received in excess of an aggregate value of \$200 from a donor during the preceding taxable year [except (1) a gift received from a person who is related to you within the third degree of consanguinity or affinity; and (2) ceremonial gifts received for a birthday, wedding, anniversary, holiday or other ceremonial occasion if the donor does not have a substantial interest in your legislative, administrative, judicial or political action] [NRS 281.571, Subsection 1(e)]:

donor	value of gift

I AFFIRM THAT ALL INFORMATION HEREIN IS ACCURATE AND COMPLETE.

Date: 3/29/03 Signature: Christie Lewis

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